

Please type a plus sign (+) inside this box → ☐

Image AF 1170045 PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Attorney Docket No.		55017-5179	First Inventor: Davey
AMENDMENT TRANSMITTAL LETTER Title: <u>Treatment Method</u>		Serial No.	09/600,831
		Filing Date	7/21/2000
		Examiner	PIAZZA CORCORAN, Gladys J.
		Group Art Unit	1733



TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.



Large Entity Status



Small Entity status of this application has been established under 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED – PART II						SMALL ENTITY		OTHER THAN SMALL ENTITY	
AMENDMENT		(Column 1)		(Column 2)	(Column 3)	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				
	Total (37 CFR 1.16(c))	*6	Minus	**20	=0	x \$=	0.00	x \$_____ =	0.00
	Independent (37 CFR 1.16(b))	*1	Minus	***4	=0	x \$=	0.00	x \$_____ =	0.00
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					x \$=		+ \$_____ =	
						TOTAL ADDIT. FEE	0.00	TOTAL ADDIT. FEE	0.00
<p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p>									

- ☒ Petition for a 2-Month Extension of Time.
- ☒ No additional fee is required for the Amendment.
- ☒ The Commissioner has already been authorized to charge the Petition fee of \$210.00 in this application to a Deposit Account. 20-0823. (A duplicate copy of Petition is enclosed)
- ☒ The Commissioner is hereby authorized to charge any other fees which may be required, or credit any overpayment, to Deposit Account Number 20-0823. I have enclosed a duplicate copy of this sheet.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 C.F.R. 1.17.


Signature

Date: April 7, 2004

Clyde L. Smith, Reg. No. 46,292
Thompson Coburn LLP
One US Bank Plaza
St. Louis, MO 63101-9928
314-552-6338
314-552-7338 FAX

Custom No.: 021888

Certificate of First Class Mailing

I hereby certify that this document and fee is being deposited with the United States Postal Service as "First Class Mail" under 37 C.F.R. 1.18 on April 7, 2004 and addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature: 

Type Name: Clyde L. Smith, Reg. No. 46,292